

# CLAIMS ONLY

SERIAL NO. \_\_\_\_\_

FILING DATE \_\_\_\_\_

APPLICANT(S)

## CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*	*	*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.
	1	1									
2		1									
3		1									
4		1									
5		1									
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TOTAL IND.	3		↓		↓		↓				
TOTAL DEP.	17	←	←	←	←	←	←	←	←	←	
TOTAL CLAIMS	20										

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS